

LETTERS to the Editor

Hazards of Sound-Alike, Look-Alike Drug Names

TO THE EDITOR: I have compiled a listing of drugs whose names look alike or sound alike. When a pharmacist takes a prescription over the telephone or attempts to decipher a physician's handwriting, a drug product not intended by the prescriber might be dispensed. Such an error might be the result of a sound-alike or look-alike drug.

I have appended a partial list of such drugs with striking similarities. Physicians are urged to exercise great care when writing or telephoning prescriptions.

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Drugs Whose Names Look Alike or Sound Alike

1. Aerolone	Aralen	Arlidin
2. Ananase	Orinase	Tolinase
3. Anavar	Anavac	Antepar
4. Arfonad	Afrin	Aspirin
5. Asminyl	Asmolin	Esimil
6. Benadryl	Benylin	Bentyl
7. Butisol	Butibel	Butabell
8. Capla	Keflin	Keflex
9. Chlorambucil	Chloromycetin	Chlor-Trimeton
10. Coramine	Calamine	Calomel
11. Cordex	Cordran	Codeine
12. Demerol	Dicumarol	Deprol
13. Digoxin	Digitoxin	Desoxyn
14. Dilantin	Phelantin	Delalutin
15. Disipal	Disophrol	Stilphostrol
16. Donnatal	Dianabol	Donnagel
17. Dopar	Dopram	Dorana
18. Doriden	Loridine	Doxidan
19. Elavil	Aldoril	Mellaril
20. Empirin	Empiral	Emprazil
21. Enduron	Imuran	Eutron
22. Esimil	Estinyl	Ismelin
23. Estomul	Ilomel	Isomel
24. Ethamide	Ethionamide	Ethinamate
25. Feosol	Feostat	Festal
26. Haldrone	Halodrin	Haldol
27. Harmony	Hormonin	Homapin
28. Isordil	Isuprel	Isomel
29. Kaomin	Kao-Con	Kaon
30. Kelex	Keflex	Keflin
31. Maalox	Maolate	Marax
32. Mebaral	Mellaril	Medrol
33. Meproamate	Meperidine	Mepergan
34. Mesantoin	Mestinon	Metatensin
35. Modane	Matulane	Mudrane
36. Ornex	Orinase	Ornade

Professional Competence

TO THE EDITOR: The editorial in CALIFORNIA MEDICINE [119:71-72, Aug 1973] entitled "Some Problems in Assuring the Professional Competence of Physicians" is of interest to the American Society of Internal Medicine because it clearly identifies the elements in this arena that have concerned us so much.

The ASIM has deplored the current trend for State medical associations to use evidence of continuing medical education efforts as a requirement for continued Association membership, or, worse, for relicensure.

The popularity of such moves is apparently based on the ease with which such evidence can be gathered, not on any conviction that attendance at educational functions really measures clinical competence.

We in ASIM believe that a preferable method is to assess actual performance. The CMA's "practice audit" is an innovative example of this concept. We believe that determined efforts on the part of the profession—started now with PSRO as a stimulus—can perfect existing techniques so as to truly assess medical care performance. Anything less will fail to give the public the honest assurance of continued competence it demands.

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37. Pantopon	Protopam	Parafon
38. Pathocil	Pathilon	Pitocin
39. Peritrate	Lotusate	Pentryate
40. Persantine	Persistin	Trasentine
41. Sansert	Cenasert	Singoserp
42. Sterazolidin	Butazolidin	Stelazine
43. Temaril	Demerol	Tepanil
44. Thyral	Thyrolar	Tryptar
45. Urised	Urestrin	Uracel
46. Urithol	Uritral	Uritone
47. Valadol	Vallestril	Vistaril
48. Valmid	Velban	Valpin
49. Vontrol	Vastran	Vosol
50. Zactirin	Saccharin	Zentron